

MILITARY INTERDEPARTMENTAL PURCHASE REQUEST					1. PAGE 1 OF PAGES				
2. FSC		3. CONTROL SYMBOL NO.		4. DATE PREPARED Today's Date		5. MIPR NUMBER Your Document Number		6. AMEND NO. BASIC	
7. TO: AFMLO/VASS 1423 Sultan Drive, Suite 200 Fort Detrick, MD 21702-5006					8. FROM: (Agency, name, telephone number of originator) 999 th MDG/SGSL (attn: POC Name Here) Any AFB, State, 12345 email.address@airforcebase.af.mil DSN 123-4567 FAX DSN 123-4567 Comm (123) 456-7890				
9. ITEMS <input type="checkbox"/> ARE <input checked="" type="checkbox"/> ARE NOT INCLUDED IN THE INTERSERVICE SUPPLY SUPPORT PROGRAM AND REQUIRED INTERSERVICE SCREENING <input type="checkbox"/> HAS <input checked="" type="checkbox"/> HAS NOT BEEN ACCOMPLISHED.									
ITEM NO.	DESCRIPTION (Federal stock number, nomenclature, specification and/or drawing No., etc.)	QTY	UNIT	ESTIMATED UNIT PRICE	ESTIMATED TOTAL PRICE				
a	b	c	d	e	f				
1.	Nonpersonal Service Description Here. Include Dates of Performance Period	1	EA	\$10,000.00	\$10,000.00				
2.	Enter Surcharge			\$ 175.00	\$ 175.00				
3.	Suggested Source: Bob's Nonpersonal Services, Inc. 123 North Avenue City, State 12345 (800)123-4567 (POC: Snuffy Medsurge) - Enter federal contract number, if applicable - If not on a federal contract, enter "Open Market"								
4.	Enter any other comments here. For example: - POC listed in block 8 is for DD Form 448-2 routing only. Medical Logistics POC is SSgt Judd Smith, DSN 123-4567, email.address@airforcebase.af.mil								
6.	THIS REQUIREMENT IS SUBJECT TO AVAILABILITY OF FUNDS THIS PLANNING DOCUMENT IS NOT A CERTIFICATION OF FUNDS								
7.	This purchase is being made by the Department of Veterans Affairs for the Department of Defense pursuant to and in accordance with the interagency agreement between the Department of Defense and the Department of Veterans Affairs, 7 Jun 84 as amended 2 Jun 89								
8.	THIS REQUIREMENT IS FOR FY 2005 *If this MIPR is to exercise an option: In line #1, state that the MIPR is to fund an option. Add the contract number and the period of performance for the option period. *If this MIPR is to replace an old contract with a new one: In line #1, state that the MIPR is to replace an old contract with a new one. State the contract number for the old contract.								
10. SEE ATTACHED PAGES FOR DELIVERY SCHEDULES, PRESERVATION AND PACKAGING INSTRUCTIONS, SHIPPING INSTRUCTIONS AND INSTRUCTIONS FOR DISTRIBUTION OF CONTRACTS AND RELATED DOCUMENTS.					11. GRAND TOTAL \$10,175.00				
12. TRANSPORTATION ALLOTMENT (Used if FOB Contractor's plant) Enter only if applicable			13. MAIL INVOICES TO (Payment will be made by) Enter DFAS Office here. See VASS Handbook for addresses. PAY OFFICE DODAAD						
14. FUNDS FOR PROCUREMENT ARE PROPERLY CHARGEABLE TO THE ALLOTMENTS SET FORTH BELOW, THE AVAILABLE BALANCES OF WHICH ARE SUFFICIENT TO COVER THE ESTIMATED TOTAL PRICE.									
ACRN	APPROPRIATION	LIMIT/SUBHEAD	SUPPLEMENTAL ACCOUNTING CLASSIFICATION	ACCTG STA DODAAD	AMOUNT				
AA	9730000	8888	2X3 0000 000000 B00000 000XX 00000X 00000 THIS IS NOT A CERTIFICATION OF FUNDS. THE ACCOUNTING CLASSIFICATION WILL BE AS STATED ABOVE PENDING APPROVAL BY {CONGRESS or THE CERTIFYING OFFICIAL}	FM0000	\$10,175.00				
15. AUTHORIZING OFFICER (Type name and title) Joe Flightcommander, Capt, USAF, MSC			16. SIGNATURE This Document Must Be Signed		17. DATE Today's Date				